

ISSUE SLIP STAPLE AREA (for additional cross references)

| POSITION | INITIALS | ID NO. | DATE |
|---------------------------|----------|--------|----------|
| FEE DETERMINATION | JB | | 5-2-D-01 |
| O.I.P.E. CLASSIFIER | | 20 | 7/18 |
| FORMALITY REVIEW | TH | 1118 | 8-21-01 |
| RESPONSE FORMALITY REVIEW | A.T. | 1071 | 01/16/02 |

INDEX OF CLAIMS

✓ Rejected
 - Allowed
 (Through numeral)..... Canceled
 + Restricted
 N Non-elected
 I Interference
 A Appeal
 O Objected

| Claim | Date |
|-------|----------|
| 1 | 5-2-D-01 |
| 2 | 7-18 |
| 3 | 8-21-01 |
| 4 | 01/16/02 |
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If more than 150 claims or 10 actions
staple additional sheet here

(LEFT INSIDE)

TC 1118

5/2/02
 4/2/02
 4/2/02